

Washington, D.C. 20231

## REQUEST FOR PATENT FEE REFUND

1 Date of Request: 4/22/032 Serial/Patent #: 09/925,109

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$ 7
	Amendment			\$ 7
	Extension of Time			\$ 7
	Notice of Appeal/Appeal			\$ 7
1460	Petition	11	11/5/02	\$ 130
	Issue			\$ 7
	Cert of Correction/Terminal Disc.			\$ 7
	Maintenance			\$ 7
	Assignment			\$ 7
	Other			\$ 7

7 TOTAL AMOUNT OF REFUND \$ 130

8 TO BE REFUNDED BY:

Treasury Check

 Credit Deposit A/C #:9 

1	9	--	2	5	3	3
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10 REASON:

 Overpayment Duplicate Payment No Fee Due (Explanation):NO FEE DUE ON 110 PETITIONS

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: D WOODTITLE: SA ATTYSIGNATURE: DWPHONE: 308 6918OFFICE: OP

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY \*\*\*\*\*

APPROVED: Oliver KellDATE: 4/23/02

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
 Refund Branch  
 Crystal Park One, Room 802B